

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Central District Of California
(State)

Case number (if known): Chapter 7

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Santa Barbara Montessori School

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 9 5 - 2 9 6 1 5 4 7

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

7421 Mirano Drive
Number Street

Number Street

P.O. Box

Goleta CA 93117
City State ZIP Code

City State ZIP Code

Location of principal assets, if different from principal place of business

Santa Barbara
County

Number Street

City State ZIP Code

5. Debtor's website (URL)

6. Type of debtor

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☒ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
☐ Chapter 9
☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes. Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY
Case number, if known _____

List all cases. If more than 1, attach a separate list.

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property? _____

Number Street

City State ZIP Code

Is the property insured?

- ☐ No
- ☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

16. Estimated liabilities

- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- ☐ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☐ I have been authorized to file this petition on behalf of the debtor.
- ☐ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

02.23.2017
MM / DD / YYYY

X

Signature of authorized representative of debtor

Title President

James Fitzpatrick

Printed name

18. Signature of attorney

X

Signature of attorney for debtor

Date

February 23, 2017
MM / DD / YYYY

Carissa N. Horowitz

Printed name

Beall & Burkhardt, APC

Firm name

1114 State Street, Suite 200

Number Street

Santa Barbara

City

CA

State

93101

ZIP Code

(805) 966-6774

Contact phone

carissa@beallandburkhardt.com

Email address

274814

Bar number

CA

State

| | | |
|--|--|---|
| Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number | | FOR COURT USE ONLY |
| Carissa N. Horowitz Beall & Burkhardt, APC 1114 State Street, Suite 200 Santa Barbara, California 93101 Phone: (805) 966-6774 Fax: (805) 963-5988 Bar No.: 274814 | | |
| <input checked="" type="checkbox"/> Attorney for: Santa Barbara Montessori School | | |
| UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA | | |
| In re: Santa Barbara Montessori School Debtor. | | CASE NO.: CHAPTER: 7 ADV. NO.: |

ELECTRONIC FILING DECLARATION
(CORPORATION/PARTNERSHIP)

- ☒ Petition, statement of affairs, schedules or lists
☐ Amendments to petition, statement of affairs, schedules or lists
☐ Other: _____

Date Filed: **February 23, 2017**
Date Filed: _____
Date Filed: _____

PART I - DECLARATION OF AUTHORIZED SIGNATORY OF DEBTOR OR OTHER PARTY

I, the undersigned, hereby declare under penalty of perjury that: (1) I have been authorized by the Debtor or other party on whose behalf the above-referenced document is being filed (Filing Party) to sign and to file, on behalf of the Filing Party, the above-referenced document being filed electronically (Filed Document); (2) I have read and understand the Filed Document; (3) the information provided in the Filed Document is true, correct and complete; (4) the "/s/," followed by my name, on the signature lines for the Filing Party in the Filed Document serves as my signature on behalf of the Filing Party and denotes the making of such declarations, requests, statements, verifications and certifications by me and by the Filing Party to the same extent and effect as my actual signature on such signature lines; (5) I have actually signed a true and correct hard copy of the Filed Document in such places on behalf of the Filing Party and provided the executed hard copy of the Filed Document to the Filing Party's attorney; and (6) I, on behalf of the Filing Party, have authorized the Filing Party's attorney to file the electronic version of the Filed Document and this Declaration with the United States Bankruptcy Court for the Central District of California.



Signature of Authorized Signatory of Filing Party

2.23.17

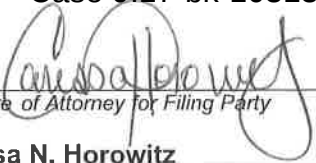
Date

Printed Name of Authorized Signatory of Filing Party

Title of Authorized Signatory of Filing Party

PART II - DECLARATION OF ATTORNEY FOR FILING PARTY

I, the undersigned Attorney for the Filing Party, hereby declare under penalty of perjury that: (1) the "/s/," followed by my name, on the signature lines for the Attorney for the Filing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) an authorized signatory of the Filing Party signed the Declaration of Authorized Signatory of Debtor or Other Party before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct hard copy of the Filed Document in the locations that are indicated by "/s/," followed by my name, and have obtained the signature of the authorized signatory of the Filing Party in the locations that are indicated by "/s/," followed by the name of the Filing Party's authorized signatory, on the true and correct hard copy of the Filed Document; (4) I shall maintain the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document for a period of five years after the closing of the case in which they are filed; and (5) I shall make the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document available for review upon request of the Court or other parties.


Signature of Attorney for Filing Party

February 23, 2017
Date

Carissa N. Horowitz

Printed Name of Attorney for Filing Party

STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Santa Barbara, California

Date: 2/23/17



Signature of Debtor

Signature of Joint Debtor

Fill in this information to identify the case:

Debtor name Santa Barbara Montessori School
United States Bankruptcy Court for the: Central District of California
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$ 6,836.85

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$ 6,836.85

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Hold Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D*

\$ 33,297.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F*

\$ 275,091.00

3b. **Total amount of claims of non-priority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*

+ \$ 203,596.99

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ 511,984.99

Fill in this information to identify the case:

Debtor name Santa Barbara Montessori School
United States Bankruptcy Court for the: Central District of California
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

| Name of institution (bank or brokerage firm) | Type of account | Last 4 digits of account number | |
|--|-----------------|---------------------------------|-------------|
| 3.1. <u>Hertage Oaks Bank</u> | <u>Checking</u> | <u>0 0 8 9</u> | \$ 4,554.41 |
| 3.2. _____ | _____ | _____ | \$ _____ |

11

4. Other cash equivalents (Identify all)

| | |
|------------|----------|
| 4.1. _____ | \$ _____ |
| 4.2. _____ | \$ _____ |

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ 4,554.41

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

| | |
|------------|----------|
| 7.1. _____ | \$ _____ |
| 7.2. _____ | \$ _____ |

Debtor

Santa Barbara Montessori School
Name

Main Document

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8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes. Fill in the information below.

Current value of debtor's
interest**11. Accounts receivable**

| | | | | | | |
|---------------------------|-------------|---|------------------------------------|---|---|--------|
| 11a. 90 days old or less: | \$0.00 | - | \$0.00 | = | → | \$0.00 |
| | face amount | | doubtful or uncollectible accounts | | | |
| 11b. Over 90 days old: | \$24,879.00 | - | \$24,879.00 | = | → | \$0.00 |
| | face amount | | doubtful or uncollectible accounts | | | |

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$0.00

Part 4: Investments**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the information below.

Valuation method
used for current valueCurrent value of debtor's
interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor

Santa Barbara Montessori School
Name

Main Document

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Case number (if known)

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|--|---|------------------------------------|
| 19. Raw materials | MM / DD / YYYY | \$ | | \$ |
| 20. Work in progress | MM / DD / YYYY | \$ | | \$ |
| 21. Finished goods, including goods held for resale | MM / DD / YYYY | \$ | | \$ |
| 22. Other inventory or supplies School Materials (paper, pens, etc.) See Attachment 1: Additional Inventory (Other Inventory or Supplies) | 02/01/2017 MM / DD / YYYY | \$ | | \$ Fair Market Value |
| 23. Total of Part 5 Add lines 19 through 22. Copy the total to line 84. | | | | \$ 0.00 |

24. Is any of the property listed in Part 5 perishable?

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 28. Crops—either planted or harvested | \$ | | \$ |
| 29. Farm animals Examples: Livestock, poultry, farm-raised fish | \$ | | \$ |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | \$ | | \$ |
| 31. Farm and fishing supplies, chemicals, and feed | \$ | | \$ |
| 32. Other farming and fishing-related property not already listed in Part 6 | \$ | | \$ |

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$

34. Is the debtor a member of an agricultural cooperative?

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \$ Valuation method Current value \$

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 39. Office furniture | | | |
| Classroom furniture (tables, shelves, chairs, etc.) | \$ | | \$ Fair Market Value |
| 40. Office fixtures | | | |
| | \$ | | \$ |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | | | |
| Computers, laptop, phones | \$ | | \$ Fair Market Value |
| See Attachment 2: Additional Office Equipment | | | |
| 42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |
| 42.1 | \$ | | \$ |
| 42.2 | \$ | | \$ |
| 42.3 | \$ | | \$ |

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
- ☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

| General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles | | | |
| 47.1 1999 Ford F350 Van | \$ 4,500.00 | Kelly Blue Book | \$ 4,500.00 |
| 47.2 2006 Ford F350 Van | \$ 7,000.00 | Kelly Blue Book | \$ 7,000.00 |
| 47.3 2006 Ford F350 Van | \$ 7,000.00 | Kelly Blue Book | \$ 7,000.00 |
| 47.4 2015 Ford F350 Van | \$ 12,500.00 | Kelly Blue Book | \$ 12,500.00 |
| 48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels | | | |
| 48.1 | \$ | | \$ |
| 48.2 | \$ | | \$ |
| 49. Aircraft and accessories | | | |
| 49.1 | \$ | | \$ |
| 49.2 | \$ | | \$ |
| 50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) | | | |
| | \$ | | \$ |
| 51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87. | | | \$31,000.00 |

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
- ☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

| Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available. | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|---|------------------------------------|
| 55.1 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.2 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.3 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.4 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.5 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.6 _____ | _____ | \$ _____ | _____ | \$ _____ |

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
- ☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 10: Intangibles and Intellectual Property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
- ☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|---|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets | \$ _____ | _____ | \$ _____ |
| 61. Internet domain names and websites | \$ _____ | _____ | \$ _____ |
| 62. Licenses, franchises, and royalties | \$ _____ | _____ | \$ _____ |
| 63. Customer lists, mailing lists, or other compilations | \$ _____ | _____ | \$ _____ |
| 64. Other intangibles, or intellectual property | \$ _____ | _____ | \$ _____ |
| 65. Goodwill | \$ _____ | _____ | \$ _____ |

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ _____

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ - _____ = \rightarrow \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Tax year _____ \$ _____
Tax year _____ \$ _____
Tax year _____ \$ _____

73. Interests in insurance policies or annuities

\$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

\$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\$ Fair Market Value

\$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|--|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | \$4,554.41 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$0.00 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$0.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$0.00 | |
| 86. Office furniture, fixtures, and equipment, and collectibles. <i>Copy line 43, Part 7.</i> | \$0.00 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$31,000.00 | |
| 88. Real property. <i>Copy line 56, Part 9.</i> → | | \$0.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | + \$0.00 | |
| 91. Total. Add lines 80 through 90 for each column. 91a. | \$35,554.41 | + 91b. \$0.00 |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | \$35,554.41 |

Attachment
Debtor: Santa Barbara Montessori School **Case No:**

Attachment 1: Additional Inventory (Other Inventory or Supplies)

Description: Montessori teaching books and games

Book Value:

Value: Fair Market Value

Attachment 2: Additional Office Equipment

Description: 3 Refrigerators (household, commercial and dorm)

Book Value:

Value: Fair Market Value

Fill in this information to identify the case: Main Document Page 19 of 67

Debtor Santa Barbara Montessori School

United States Bankruptcy Court for the: Central District of California

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Andrew and Lynn Chou

4616 Via Gennita

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Total claim

\$4,562.00

Priority amount

\$2,775.00

2.2 Priority creditor's name and mailing address

Angela Thomsen

1065 Camino del Retiro

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
- ☐ Yes

\$6,896.00

\$2,775.00

2.3 Priority creditor's name and mailing address

Anna and Claudio Bonometti

445 North La Cumbre Road

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
- ☐ Yes

\$16,703.00

\$2,775.00

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.4 Priority creditor's name and mailing address

\$ 9,283.00

\$ 2,775.00

Anne and Westley Hall

848 Calle Cortita

Santa Barbara, CA 93109

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.5 Priority creditor's name and mailing address

\$ 9,428.00

\$ 2,775.00

Asha Wilkus-Stone and Clay Miner

959 Barcelona Drive

Santa Barbara, CA 93105

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.6 Priority creditor's name and mailing address

\$ 18,298.00

\$ 2,775.00

Barbara DeVivo

105 Santa Rosa Place

Santa Barbara, CA 93109

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.7 Priority creditor's name and mailing address

\$ 7,650.00

\$ 2,775.00

Bill Millerski and Susan Raggio

216 Cannon Green

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.8 Priority creditor's name and mailing address

\$ 7,350.00

\$ 2,775.00

Brett and Deanna Williams

920 Ontare Road

Santa Barbara, CA 93105

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.9 Priority creditor's name and mailing address

\$ 12,701.00

\$ 2,775.00

Brian and MiYoung Cogswell

4827 Zink Place

Santa Barbara, CA 93111

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.10 Priority creditor's name and mailing address

\$ 4,587.00

\$ 2,775.00

Cynthia and Jeff Yang

5882 Via Fiori

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.11 Priority creditor's name and mailing address

\$ 94.00

\$ 94.00

Daniel and Jennifer Yoshimi

695 Russell Way

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.12 Priority creditor's name and mailing address

\$ 1,725.00

\$ 1,725.00

Don and Tracy Dodge
25 West Arrellaga
Santa Barbara, CA 93101

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.13 Priority creditor's name and mailing address

\$ 6,999.00

\$ 2,775.00

Ellen and Ernie Borden
96 Sommer Lane
Goleta , CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.14 Priority creditor's name and mailing address

\$ 2,480.00

\$ 2,480.00

Enrico Rossi and Margarita Marinova
212 Charter House Lane
Williamsburg, VA 23188

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.15 Priority creditor's name and mailing address

\$ 5,608.00

\$ 2,775.00

Gianfranco and Simona Bonometti
744 Cieneguitas Road, Apartment D
Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.16 Priority creditor's name and mailing address

\$ 18,000.00

\$ 2,775.00

Jason and Eva Turenchalk

231 Santa Barbara Shores Drive

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.17 Priority creditor's name and mailing address

\$ 2,790.00

\$ 2,775.00

Jason and Robin Yardi

1689 Franceschi

Santa Barbara, CA 93103

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.18 Priority creditor's name and mailing address

\$ 2,347.00

\$ 2,347.00

Jeff Burton and Vega Finucan

624 Island View Drive

Santa Barbara, CA 93109

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.19 Priority creditor's name and mailing address

\$ 9,150.00

\$ 2,775.00

John and Louise Kamps

4633 Via huerto

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.20 Priority creditor's name and mailing address

\$ 3,876.00

\$ 2,775.00

John and Torrey Monnich
321 East Micheltorena
Santa Barbara, CA 93101

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.21 Priority creditor's name and mailing address

\$ 4,320.00

\$ 2,775.00

Josh and Gretchen Walker
293 Savona Avenue
Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.22 Priority creditor's name and mailing address

\$ 10,995.00

\$ 2,775.00

Kevin and Sharla Brown
4377 Via Esperanza
Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.23 Priority creditor's name and mailing address

\$ 3,720.00

\$ 2,775.00

Leah and Jose Sahagun
3059 Lucinda Lane
Santa Barbara, CA 93105

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.24 Priority creditor's name and mailing address

\$ 1,770.00

\$ 1,770.00

Liana and Arjun Rao

49 Dearborn Place #15

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.25 Priority creditor's name and mailing address

\$ 473.00

\$ 473.00

Manish and Suman Mehta

80 Sanderling Lane

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

2.26 Priority creditor's name and mailing address

\$ 3,337.00

\$ 2,775.00

Mayara and Kyle Riddlebaugh

610 Corte Bella

Santa Barbara, CA 93111

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.27 Priority creditor's name and mailing address

\$ 3,829.00

\$ 2,775.00

Michael and Alexis Bingham

243 Salida Del Sol

Santa Barbara, CA 93109

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.28 Priority creditor's name and mailing address

\$ 6,390.00

\$ 2,775.00

Michael and Jessica McLernon

479 Los Feliz Drive

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.29 Priority creditor's name and mailing address

\$ 13,188.00

\$ 2,775.00

Mikko and Saija Sivonen

6872 Buttonwood Lane

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.30 Priority creditor's name and mailing address

\$ 14,918.00

\$ 2,775.00

Nicholas and Ariel Long

3920 Harrold Avenue

Santa Barbara, CA 93110

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.31 Priority creditor's name and mailing address

\$ 6,161.00

\$ 2,775.00

Nihal and Shraddha Desai

308 Pacific Oaks Road

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.32 Priority creditor's name and mailing address

\$ 3,645.00

\$ 2,775.00

Russell and Alison Lindsey

230 La Pinta Place

Buellton, CA 93427

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.33 Priority creditor's name and mailing address

\$ 10,050.00

\$ 2,775.00

Steve and Ann Welton

1719 Anacapa Street

Santa Barbara, CA 93101

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.34 Priority creditor's name and mailing address

\$ 6,279.00

\$ 2,775.00

Steve and Dana Sherlock

261 Ancona Avenue

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

2.35 Priority creditor's name and mailing address

\$ 9,810.00

\$ 2,775.00

Steve and Lyndsey Finkel

P.O. Box 344

Summerland, CA 93067

Date or dates debt was incurred

Last 4 digits of account
numberSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (7)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Deposits by Individuals

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

| | | | | |
|------|--|---|------------------------------------|---------------------------------------|
| 2.36 | Priority creditor's name and mailing address Stewart and Sarah Rassmussen P.O. Box 779 Summerland, CA 93067 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Total claim \$ 6,713.00 | Priority amount \$ 2,775.00 |
| 2.37 | Priority creditor's name and mailing address Theo and Becky Kracke 2461 Calle Almonte Santa Barbara, CA 93109 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Total claim \$ 10,337.00 | Priority amount \$ 2,775.00 |
| 2.38 | Priority creditor's name and mailing address Thomas and Melika Adams 1132 Nirvana Road Santa Barbara, CA 93105 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Total claim \$ 3,151.00 | Priority amount \$ 2,775.00 |
| 2.39 | Priority creditor's name and mailing address Tom and Adrienne Adam 7853 Rio Vista Drive Goleta, CA 93117 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Total claim \$ 5,478.00 | Priority amount \$ 2,775.00 |

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 4 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | Amount of claim |
|------------|---|---|
| 3.1 | Nonpriority creditor's name and mailing address <u>AFCO</u> <u>P.O. Box 26908</u> <u>Los Angeles, CA 90080</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$1,169.90</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.2 | Nonpriority creditor's name and mailing address <u>American Airlines Card Services</u> <u>P.O. Box 60517</u> <u>Phoenix, AZ 85038</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$13,245.92</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.3 | Nonpriority creditor's name and mailing address <u>Bank of America</u> <u>P.O. Box 982235</u> <u>El Paso, Texas 79998</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$9,837.43</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.4 | Nonpriority creditor's name and mailing address <u>Bank of America</u> <u>P.O. Box 982235</u> <u>El Paso, Texas 79998</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$459.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.5 | Nonpriority creditor's name and mailing address <u>Blue Shield of California</u> <u>P.O. Box 3008</u> <u>Lodi, CA 95241</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$2,213.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.6 | Nonpriority creditor's name and mailing address <u>Brent Anderson</u> <u>Santa Barbara, CA 93101</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <u>\$35,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|--|--------------|
| 3.7 | Nonpriority creditor's name and mailing address Chase P.O. Box 94014 Palatine, Illinois 60094 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 12,729.32 |
| 3.8 | Nonpriority creditor's name and mailing address Chase Bank USA, NA P.O. Box 15298 Wilmington, Delaware 19850 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 24,923.00 |
| 3.9 | Nonpriority creditor's name and mailing address Cox Communications P.O. Box 6058 Cypress, California 90630 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 98.10 |
| 3.10 | Nonpriority creditor's name and mailing address Delage Financial Services P.O. Box 41602 Philadelphia, PA 41602 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 218.87 |
| 3.11 | Nonpriority creditor's name and mailing address Delta Dental P.O. Box 26908 San Francisco, CA 94126 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 722.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12

Nonpriority creditor's name and mailing address

Dex Media

P.O. Box 619009

Dew Airport, TX 75261

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed☐ Liquidated and neither contingent nor disputed

Basis for the claim: Trade Debt

Is the claim subject to offset?

☒ No☐ Yes

\$ 38.45

3.13

Nonpriority creditor's name and mailing address

Empire Cleaning

7733 Telegraph Road

Montebello, CA 90640

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: Trade Debt

Is the claim subject to offset?

☒ No☐ Yes

\$ 295.00

3.14

Nonpriority creditor's name and mailing address

Frontier Communications

P.O. Box 740407

Cincinnati, OH 45274

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: Trade Debt

Is the claim subject to offset?

☒ No☐ Yes

\$ 271.40

3.15

Nonpriority creditor's name and mailing address

Goleta Union School District

401 North Fairview

Goleta, CA 93117

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: Trade Debt - lease

Is the claim subject to offset?

☒ No☐ Yes

\$ 49,500.00

3.16

Nonpriority creditor's name and mailing address

Heritage Oaks Bank

1035 State Street

Santa Barbara, CA 93101

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: Trade debt

Is the claim subject to offset?

☒ No☐ Yes

\$ 1,000.00

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|---|---------------------|
| 3.17 | Nonpriority creditor's name and mailing address <u>Home Depot</u> <u>P.O. Box 182676</u> <u>Columbus, Ohio 43218-2676</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ <u>178.17</u> |
| 3.18 | Nonpriority creditor's name and mailing address <u>Jim Fitzpatrick</u> <u>720 Mateo Court</u> <u>Santa Barbara, CA 93111</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt - loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ <u>45,000.00</u> |
| 3.19 | Nonpriority creditor's name and mailing address <u>MarBorg</u> <u>P.O. Box 4127</u> <u>Santa Barbara, CA 93140</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ <u>200.00</u> |
| 3.20 | Nonpriority creditor's name and mailing address <u>Michael Kelly</u> <u>1129 State Street #15</u> <u>Santa Barbara, CA 93101</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ <u>2,515.00</u> |
| 3.21 | Nonpriority creditor's name and mailing address <u>Montessori Services</u> <u>11 West 9th Street</u> <u>Santa Rosa, CA 95401</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ <u>64.89</u> |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|---|--------------------|
| 3.22 | Nonpriority creditor's name and mailing address <u>NEK Insurance</u> <u>P.O. Box 15019</u> <u>El Cerrito, CA 94530</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 1,017.00 |
| 3.23 | Nonpriority creditor's name and mailing address <u>New York Life</u> <u>P.O. Box 922</u> <u>New York, NY 10159</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 840.00 |
| 3.24 | Nonpriority creditor's name and mailing address <u>Performance Group</u> <u>762 Calle Plano</u> <u>Camarillo, CA 93012</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 53.41 |
| 3.25 | Nonpriority creditor's name and mailing address <u>Pitney Bowes</u> <u>P.O. Box 371887</u> <u>Pittsburgh, PA 15250</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 163.00 |
| 3.26 | Nonpriority creditor's name and mailing address <u>San Marcos Self Storage</u> <u>4093 State Street</u> <u>Santa Barbara, CA 93101</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 355.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|--|-----------|
| 3,27 | Nonpriority creditor's name and mailing address Santa Barbara Axxess 1616 Chapala Street #1 Santa Barbara, CA 93101 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 600.00 |
| 3,28 | Nonpriority creditor's name and mailing address United States Liability Insurance P.O. Box 62778 Baltimore, CA 21264 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 388.40 |
| 3,29 | Nonpriority creditor's name and mailing address Water Store 94 Frederick Lopez Road, Suite B Santa Barbara, CA 93117 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 388.80 |
| 3,30 | Nonpriority creditor's name and mailing address Yearbook Life 9710 Striling Road Cooper City, FL 33024 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 111.23 |
| 3,31 | Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ _____ |

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|--------------------------|--|---|
| 4.1. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.2. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.3. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.4. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.5. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.6. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.7. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.8. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.9. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.10. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.11. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.12. _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

| | | Total of claim amounts |
|---|-------|------------------------|
| 5a. Total claims from Part 1 | 5a. | \$275,091.00 |
| 5b. Total claims from Part 2 | 5b. + | \$203,596.99 |
| 5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c. | 5c. | \$478,687.99 |

Fill in this information to identify the case:

Debtor name Santa Barbara Montessori School

United States Bankruptcy Court for the: Central District of California

Case number (If known): _____ Chapter 7

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.5

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name Santa Barbara Montessori School

United States Bankruptcy Court for the: Central District of California

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

| Column 1: Codebtor | | | | Column 2: Creditor | |
|---------------------|---------------------------|--------|----------|--------------------|--|
| Name | Mailing address | | | Name | Check all schedules that apply: |
| 2.1 Jim Fitzpatrick | 720 Mateo Court Street | | | Ford Credit | <input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G |
| | Santa Barbara | CA | 93111 | See Attachment 1 | |
| | City | State | ZIP Code | | |
| 2.2 | | Street | | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| | | | | | |
| | City | State | ZIP Code | | |
| 2.3 | | Street | | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| | | | | | |
| | City | State | ZIP Code | | |
| 2.4 | | Street | | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| | | | | | |
| | City | State | ZIP Code | | |
| 2.5 | | Street | | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| | | | | | |
| | City | State | ZIP Code | | |
| 2.6 | | Street | | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| | | | | | |
| | City | State | ZIP Code | | |

Attachment

Debtor: Santa Barbara Montessori School

Case No:

Attachment 1

American Airlines Card Services, Schedule E/F

Fill in this information to identify the case and this filing:

Debtor Name Santa Barbara Montessori School
United States Bankruptcy Court for the: Central District Of California
Case number (if known): _____

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206—Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/23/2017
MM / DD / YYYY

x

Signature of individual signing on behalf of debtor

James Fitzpatrick
Printed name

President
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Santa Barbara Montessori School
United States Bankruptcy Court for the: Central District of California
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

| Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year | | | Sources of revenue Check all that apply | Gross revenue (before deductions and exclusions) |
|---|--|--|--|---|
| From the beginning of the fiscal year to filing date: | From <u>01/01/2016</u> MM / DD / YYYY | to Filing date | <input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ | \$ <u>1,460,599.00</u> |
| For prior year: | From <u>01/01/2015</u> MM / DD / YYYY | to <u>12/31/2015</u> MM / DD / YYYY | <input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ | \$ <u>1,494,709.00</u> |
| For the year before that: | From <u>01/01/2014</u> MM / DD / YYYY | to <u>12/31/2014</u> MM / DD / YYYY | <input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ | \$ <u>1,666,939.00</u> |

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

| | | | Description of sources of revenue | Gross revenue from each source (before deductions and exclusions) |
|---|------------------------------|----------------------------|-----------------------------------|--|
| From the beginning of the fiscal year to filing date: | From _____ MM / DD / YYYY | to Filing date | _____ | \$ _____ |
| For prior year: | From _____ MM / DD / YYYY | to _____ MM / DD / YYYY | _____ | \$ _____ |
| For the year before that: | From _____ MM / DD / YYYY | to _____ MM / DD / YYYY | _____ | \$ _____ |

Debtor Santa Barbara Montessori School
Name

Case number (if known)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

| Creditor's name and address | Dates | Total amount or value | Reasons for payment or transfer <i>Check all that apply</i> |
|--|-------|-----------------------|---|
| 3.1. Creditor's name Street City State ZIP Code | | \$ | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other |
| 3.2. Creditor's name Street City State ZIP Code | | \$ | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

| Insider's name and address | Dates | Total amount or value | Reasons for payment or transfer |
|---|-------|-----------------------|---------------------------------|
| 4.1. Frances Fitzpatrick Insider's name 720 Mateo Court Street Santa Barbara CA 93111 City State ZIP Code Relationship to debtor Director | | \$ 82,743.00 | Wages for 12 months |
| 4.2. James Fitzpatrick Insider's name 720 Mateo Court Street Santa Barbara CA 93111 City State ZIP Code Relationship to debtor Director | | \$ 66,400.00 | Wages for 12 months |

See Attachment 1

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

| Creditor's name and address | Description of the property | Date | Value of property |
|--|-----------------------------|-------|-------------------|
| 5.1. _____ Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____ | _____ | _____ | \$ _____ |
| 5.1. _____ Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____ | _____ | _____ | \$ _____ |

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|---------------------------------------|--|-----------------------|----------|
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| City _____ State _____ ZIP Code _____ | Last 4 digits of account number: XXXX- _____ | | |

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

| Case title | Nature of case | Court or agency's name and address | Status of case |
|-------------------|----------------|---|--|
| 7.1. _____ | _____ | Name _____ Street _____ City _____ State _____ ZIP Code _____ | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Case number _____ | | | |
| 7.2. _____ | _____ | Name _____ Street _____ City _____ State _____ ZIP Code _____ | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Case title _____ | | Court or agency's name and address _____ | |
| Case number _____ | | | |

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

| Custodian's name and address | Description of the property | Value |
|------------------------------|-----------------------------|------------------------|
| Custodian's name | | \$ |
| Street | Case title | Court name and address |
| City State ZIP Code | Case number | Name |
| | Date of order or assignment | Street |
| | | City State ZIP Code |

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

| Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
|------------------------------------|---|-------------|-------|
| 9.1. Recipient's name | | | \$ |
| Street | | | |
| City State ZIP Code | | | |
| Recipient's relationship to debtor | | | |
| 9.2. Recipient's name | | | \$ |
| Street | | | |
| City State ZIP Code | | | |
| Recipient's relationship to debtor | | | |

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

| Description of the property lost and how the loss occurred | Amount of payments received for the loss | Date of loss | Value of property lost |
|--|---|--------------|------------------------|
| | If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property). | | \$ |
| | | | |

Debtor Santa Barbara Montessori School
Name

Case number (if known) _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

| | Who was paid or who received the transfer? | If not money, describe any property transferred | Dates | Total amount or value |
|-------|--|---|-------|-----------------------|
| 11.1. | Beall & Burkhardt, APC Address 1114 State Street, Suite 200 Street Santa Barbara CA 93101 City State ZIP Code Email or website address Who made the payment, if not debtor? | | | \$ 2,000.00 |
| 11.2. | | | | \$ |

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

| Name of trust or device | Describe any property transferred | Dates transfers were made | Total amount or value |
|-------------------------|-----------------------------------|---------------------------|-----------------------|
| | | | \$ |
| Trustee | | | |

Debtor Santa Barbara Montessori School
Name

Case number (if known)

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

| Who received transfer? | Description of property transferred or payments received or debts paid in exchange | Date transfer was made | Total amount or value |
|---|--|------------------------|-----------------------|
| 13.1. _____ | _____ | _____ | \$ _____ |
| Address _____ Street _____ City State ZIP Code Relationship to debtor _____ | | | |
| 13.2. _____ | _____ | _____ | \$ _____ |
| Address _____ Street _____ City State ZIP Code Relationship to debtor _____ | | | |

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

| Address | Dates of occupancy |
|---|---------------------|
| 14.1. _____ Street _____ City State ZIP Code | From _____ To _____ |
| 14.2. _____ Street _____ City State ZIP Code | From _____ To _____ |

Debtor Santa Barbara Montessori School
Name

Case number (if known)

Part 8: Healthcare Bankruptcies

15. Healthcare bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

| Facility name and address | Nature of the business operation, including type of services the debtor provides | If debtor provides meals and housing, number of patients in debtor's care |
|---------------------------|--|---|
|---------------------------|--|---|

15.1.

| | | |
|---------------------|---|--|
| Facility name | | |
| Street | Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. | How are records kept? |
| City State ZIP Code | | Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper |

| Facility name and address | Nature of the business operation, including type of services the debtor provides | If debtor provides meals and housing, number of patients in debtor's care |
|---------------------------|--|---|
|---------------------------|--|---|

15.2.

| | | |
|---------------------|---|--|
| Facility name | | |
| Street | Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. | How are records kept? |
| City State ZIP Code | | Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper |

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
☒ Yes. State the nature of the information collected and retained. Personal records of families and children

Does the debtor have a privacy policy about that information?

- ☐ No
☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

- ☐ No. Go to Part 10.
☐ Yes. Fill in below:

| Name of plan | Employer identification number of the plan |
|--------------|--|
| | EIN: _____ |

Has the plan been terminated?

- ☐ No
☐ Yes

Debtor Santa Barbara Montessori School
Name

Case number (if known) _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

| | Financial institution name and address | Last 4 digits of account number | Type of account | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|-------|---|---------------------------------|---|--|---|
| 18.1. | <u>Union Bank (two accounts)</u> Name Street <u>Santa Barbara</u> <u>CA</u> City State ZIP Code | XXXX-____ | <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ | <u>January 13, 2017</u> | <u>\$ 94.79</u> |
| 18.2. | <u>Wells Fargo</u> Name Street <u>Santa Barbara</u> <u>CA</u> City State ZIP Code | XXXX-____ | <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ | <u>January 10, 2017</u> | <u>\$ 4,656.89</u> |

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

| Depository institution name and address | Names of anyone with access to it | Description of the contents | Does debtor still have it? |
|---|-----------------------------------|-----------------------------|---|
| Name Street City State ZIP Code | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Address | | | |

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

| Facility name and address | Names of anyone with access to it | Description of the contents | Does debtor still have it? |
|---|-----------------------------------|---------------------------------------|--|
| <u>San Marcos Storage</u> Name <u>4093 State Street</u> Street <u>Santa Barbara</u> <u>CA</u> <u>93110</u> City State ZIP Code | | <u>Classroom Supplies</u> | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| Address | | | |

Debtor Santa Barbara Montessori School
Name

Case number (if known)

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

| Owner's name and address | Location of the property | Description of the property | Value |
|--------------------------|--------------------------|-----------------------------|-------|
| Name | | | \$ |
| Street | | | |
| City State ZIP Code | | | |

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium)
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Provide details below.

| Case title | Court or agency name and address | Nature of the case | Status of case |
|-------------|----------------------------------|--------------------|------------------------------------|
| Case number | Name | | <input type="checkbox"/> Pending |
| | Street | | <input type="checkbox"/> On appeal |
| | City State ZIP Code | | <input type="checkbox"/> Concluded |

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|------------------------------------|-----------------------------|----------------|
| Name | Name | | |
| Street | Street | | |
| City State ZIP Code | City State ZIP Code | | |

Debtor

Santa Barbara Montessori School

Name

Case number (if known)

24. Has the debtor notified any governmental unit of any release of hazardous material?☒ No☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|------------------------------------|-----------------------------|----------------|
| Name | Name | | |
| Street | Street | | |
| City State ZIP Code | City State ZIP Code | | |

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

| Business name and address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
|---|-------------------------------------|---|
| 25.1. Name Street City State ZIP Code | | EIN: _____ Dates business existed From _____ To _____ |
| 25.2. Business name and address Name Street City State ZIP Code | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____ |
| 25.3. Business name and address Name Street City State ZIP Code | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____ |

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

| Name and address | Dates of service |
|---|---------------------------------|
| 26a.1. <u>Micheal Kelly</u> Name <u>1129 State Street #15</u> Street <u>Santa Barbara</u> <u>CA</u> <u>93101</u> City State ZIP Code | From _____ To <u>12/15/2016</u> |

| Name and address | Dates of service |
|---|---|
| 26a.2. <u>Robert Davis</u> Name <u>17 Antonette Avenue</u> Street <u>San Rafael</u> <u>CA</u> <u>94901</u> City State ZIP Code | From <u>01/01/2012</u> To <u>02/08/2016</u> See Attachment 2 |

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

| Name and address | Dates of service |
|---|---------------------|
| 26b.1. _____ Name _____ Street _____ City State ZIP Code | From _____ To _____ |

| Name and address | Dates of service |
|---|---------------------|
| 26b.2. _____ Name _____ Street _____ City State ZIP Code | From _____ To _____ |

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

| Name and address | If any books of account and records are unavailable, explain why |
|---|--|
| 26c.1. <u>Michael Kelly</u> Name <u>1129 State Street #15</u> Street <u>Santa Barbara</u> <u>CA</u> <u>93101</u> City State ZIP Code | _____ _____ _____ |

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

Name and address

If any books of account and records are
unavailable, explain why

26c.2. Melissa Moreno

Name

7421 Mirano Drive

Street

Goleta

CA

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

26d.2.

Name

Street

City

State

ZIP Code

Name and address

26d.2.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of
inventory

The dollar amount and basis (cost, market, or
other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

Name of the person who supervised the taking of the inventory Date of inventory The dollar amount and basis (cost, market, or other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

| Name | Address | Position and nature of any interest | % of interest, if any |
|-------------------|--|-------------------------------------|-----------------------|
| James Fitzpatrick | 720 Mateo Court, Santa Barbara, CA 93110 | President - Shareholder | 100 |
| | | | |
| | | | |
| | | | |

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

| Name | Address | Position and nature of any interest | Period during which position or interest was held |
|----------------------|--|-------------------------------------|---|
| Melissa Moreno | 7421 Mirano Drive, Goleta, CA 93117 | Board Chair - 0% | From 8/2014 To 12/2016 |
| Mark Montgomery | 7421 Mirano Drive, Goleta, CA 93117 | Board Member - 0% | From 8/2014 To 12/2016 |
| Frances Fitzpatrick | 720 Mateo Court, Santa Barbara, CA 93110 | Secretary - 0% | From 8/2014 To 12/2016 |
| Lead Wardlaw Jaffurs | 7421 Mirano Drive, Goleta, CA 93117 | Board Member - 0% | From 8/2014 To 12/2016 |

See Attachment 3

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

| Name and address of recipient | Amount of money or description and value of property | Dates | Reason for providing the value |
|-------------------------------|--|-------|--------------------------------|
|-------------------------------|--|-------|--------------------------------|

30.1. See Payments to Insiders for Wages

Name

Street

City

State

ZIP Code

Relationship to debtor

Debtor Santa Barbara Montessori School Case number (if known) _____
Name

Name and address of recipient

Name

Street

City

State

ZIP Code

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY

x

Signature of individual signing on behalf of the debtor

Printed name James Fitzpatrick

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

Attachment

Debtor: Santa Barbara Montessori School

Case No:

Attachment 1 Additional Payments or Transfers to Insiders:

Insider's Name: Colin Fitzpatrick

Insider's Address: 929 West Mission Street, Santa Barbara, CA 93111

Relationship to Debtor: Insider of an Affiliate

Date of Payments or Transfers: \$58,405.00

Reasons for Payment or Transfer: Wages for 12 months

Insider's Name: Michelle Ordosgoitia

Insider's Address: 929 West Mission Street, Santa Babara, CA 93101

Relationship to Debtor: Insider of an Affiliate

Date of Payments or Transfers: \$61,113.42

Reasons for Payment or Transfer: Wages for 12 months

Insider's Name: Aran Klingensmmith

Insider's Address: 7421 Mirano Drive , Goleta , CA 93117

Relationship to Debtor: Insider of an Affiliate

Date of Payments or Transfers: \$9,100.00

Reasons for Payment or Transfer: Wages for 2016

Attachment 2 Additional Accountants or Bookkeepers:

Name: Melissa Moreno

Address: 7421 Mirano Drive, Goleta, CA 93117

Dates of Service: August 15, 2016 to December 15, 2016

Attachment 3

Additional Former Controlling Parties:

Name: Margaret Barlow

Address: 7421 Mirano Drive, Goleta, CA 93117

Position and Nature of Interest: Board Member - 0%

Interest Held: 08/2014 to 06/2016

| | | | |
|--|--|---|--|
| <p>Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address</p> <p>Carissa N. Horowitz 1114 State Street, Suite 200, Santa Barbara, California 93101 Phone: (805) 966-6774 Fax: (805) 963-5988 Bar No: 274814</p> <p><input type="checkbox"/> Debtor(s) appearing without attorney <input checked="" type="checkbox"/> Attorney for Debtor</p> | | <p>FOR COURT USE ONLY</p> | |
| <p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - _____</p> | | | |
| <p>In re:</p> <p>Santa Barbara Montessori School</p> <p>Debtor(s).</p> | | <p>CASE NO.:</p> <p>CHAPTER: 7</p> <p>VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(d)]</p> | |

Pursuant to LBR 1007-1(d), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 9 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: _____

Debtor's signature

Date: _____

Joint Debtor's signature (if applicable)

Date: February 17, 2017

Attorney's signature (if applicable)

Santa Barbara Montessori School
7421 Mirano Drive
Goleta, CA 93117

Carissa N. Horowitz
1114 State Street, Suite 200
Santa Barbara, CA 93101

AFCO
P.O. Box 26908
Los Angeles, CA 90080

American Airlines Card Services
P.O. Box 60517
Phoenix, AZ 85038

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4616 Via Gennita
Santa Barbara, CA 93110

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Santa Barbara, CA 93110

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445 North La Cumbre Road
Santa Barbara, CA 93110

Anne and Westley Hall
848 Calle Cortita
Santa Barbara, CA 93109

Asha Wilkus-Stone and Clay Miner
959 Barcelona Drive
Santa Barbara, CA 93105

Bank of America
P.O. Box 982235
El Paso, TX 79998

Barbara DeVivo
105 Santa Rosa Place
Santa Barbara, CA 93109

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216 Cannon Green
Goleta, CA 93117

Blue Shield of California
P.O. Box 3008
Lodi, CA 95241

Brent Anderson

Santa Barbara, CA 93101

Brett and Deanna Williams
920 Ontare Road
Santa Barbara, CA 93105

Brian and MiYoung Cogswell
4827 Zink Place
Santa Barbara, CA 93111

Chase
P.O. Box 94014
Palatine, IL 60094

Chase Bank USA, NA
P.O. Box 15298
Wilmington, DE 19850

Cox Communications
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Cypress, CA 90630

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Santa Barbara, CA 93110

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Philadelphia, PA 41602

Delta Dental
P.O. Box 26908
San Francisco, CA 94126

Dex Media
P.O. Box 619009
Dew Airport, TX 75261

Don and Tracy Dodge
25 West Arrellaga
Santa Barbara, CA 93101

Ellen and Ernie Borden
96 Sommer Lane
Goleta, CA 93117

Empire Cleaning
7733 Telegraph Road
Montebello, CA 90640

Enrico Rossi and Margarita Marinova
212 Charter House Lane
Williamsburg, VA 23188

Ford Credit
P.O. Box 54200
Omaha, NE 68154

Frontier Communications
P.O. Box 740407
Cincinnati, OH 45274

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Goleta, CA 93117

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1035 State Street
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Home Depot
P.O. Box 182676
Columbus, OH 43218-2676

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231 Santa Barbara Shores Drive
Goleta, CA 93117

Jason and Robin Yardi
1689 Franceschi
Santa Barbara, CA 93103

Jeff Burton and Vega Finucan
624 Island View Drive
Santa Barbara, CA 93109

Jim Fitzpatrick
720 Mateo Court
Santa Barbara, CA 93111

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Josh and Gretchen Walker
293 Savona Avenue
Goleta, CA 93117

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4377 Via Esperanza
Santa Barbara, CA 93110

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3059 Lucinda Lane
Santa Barbara, CA 93105

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49 Dearborn Place #15
Goleta, CA 93117

Manish and Suman Mehta
80 Sanderling Lane
Goleta, CA 93117

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P.O. Box 4127
Santa Barbara, CA 93140

Mayara and Kyle Riddlebaugh
610 Corte Bella
Santa Barbara, CA 93111

Michael and Alexis Bingham
243 Salida Del Sol
Santa Barbara, CA 93109

Michael and Jessica McLernon
479 los Feliz Drive
Santa Barbara, CA 93110

Michael Kelly
1129 State Street #15
Santa Barbara, CA 93101

Mikko and Saija Sivonen
6872 Buttonwood Lane
Goleta, CA 93117

Montessori Services
11 West 9th Street
Santa Rosa, CA 95401

NEK Insurance
P.O. Box 15019
El Cerrito, CA 94530

New York Life
P.O. Box 922
New York, NY 10159

Nicholas and Ariel Long
3920 Harrold Avenue
Santa Barbara, CA 93110

Nihal and Shraddha Desai
308 Pacific Oaks Road
Goleta, CA 93117

Performance Group
762 Calle Plano
Camarillo, CA 93012

Pitney Bowes
P.O. Box 371887
Pittsburgh, PA 15250

Russell and Alison Lindsey
230 La Pinta Place
Buellton, CA 93427

San Marcos Self Storage
4093 State Street
Santa Barbara, CA 93101

Santa Barbara Axxess
1616 Chapala Street #1
Santa Barbara, CA 93101

Steve and Ann Welton
1719 Anacapa Street
Santa Barbara, CA 93101

Steve and Dana Sherlock
261 Ancona Avenue
Goleta, CA 93117

Steve and Lyndsey Finkel
P.O. Box 344
Summerland, CA 93067

Stewart and Sarah Rassmussen
P.O. Box 779
Summerland, CA 93067

Theo and Becky Kracke
2461 Calle Almonte
Santa Barbara, CA 93109

Thomas and Melika Adams
1132 Nirvana Road
Santa Barbara, CA 93105

Tom and Adrienne Adam
7853 Rio Vista Drive
Goleta, CA 93117

United States Liability Insurance
P.O. Box 62778
Baltimore, CA 21264

Water Store
94 Frederick Lopez Road, Suite B
Santa Barbara, CA 93117

Yearbook Life
9710 Striling Road
Cooper City, FL 33024

United States Bankruptcy Court
Central District of California

In re **Santa Barbara Montessori School**

Case No.

Debtor.

Chapter **7**

STATEMENT OF CORPORATE OWNERSHIP

Comes now **Santa Barbara Montessori School** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

 All corporations that directly or indirectly own 10% or more of any class of the corporation's equity interests are listed below:

OR,

X There are no entities to report.

By: 

Carissa N. Horowitz
Signature of Attorney

Counsel for

Bar no.: **274814**

Address.: **1114 State Street, Suite 200**
Santa Barbara, California 93101

Telephone No.: **(805) 966-6774**

Fax No.: **(805) 963-5988**

E-mail address: **carissa@beallandburkhardt.com**

UNITED STATES BANKRUPTCY COURT
Central District of California

In re:

Case No. BKY

Santa Barbara Montessori School,

Debtor(s)

Chapter 7 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

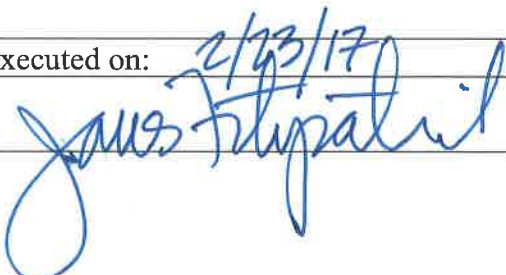
I, James Fitzpatrick, declare under penalty of perjury that I am the President of Santa Barbara Montessori School, a California corporation and that on February 23, 2017 the following resolution was duly adopted by the Board of Directors of this corporation:

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 7 of Title 11 of the United States Code;

Be It Therefore Resolved, that James Fitzpatrick, President of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 7 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that James Fitzpatrick, President of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that James Fitzpatrick, President of this corporation, is authorized and directed to employ Carissa N. Horowitz, attorney and the law firm of Beall & Burkhardt, APC to represent the corporation in such bankruptcy case."

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|---|--|
| Executed on: 2/23/17  | Signed: James Fitzpatrick 7421 Mirano Drive, Goleta, CA 93117 (Name and Address of Subscriber) |
|---|--|